FORM PTO-1083 Docket No.: 600.1118 Date: February 2, 2005 COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450 In re application of: VROTACOÈ Serial No.: 09/767,108 Filed: January 22, 2001 For: FLOW-RESTRICTED PRINTING CYLINDER FOR A REMOVABLE PRINTING SLEEVE Sir: Transmitted herewith is an Response to Office Action (10 pages) in the above-identified application. [] Also transmitted herewith are: [] Petition for extension under 37 C.F.R. 1.136 [] Other: [] Check(s) in the amount of \$0.00 is/are attached to cover: [] Filing fee for additional claims under 37 C.F.R. 1.16 [] Petition fee for extension under 37 C.F.R. 1.136 [] Other: [X] The Assistant Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0552. [X] Any filing fee under 37 C.F.R. 1.16 for the presentation of additional claims which are not paid by check submitted herewith. Any patent application processing fees under 37 C.F.R. 1.17. X Any petition fees for extension under 37 C.F.R. 1.136 which are not paid by check submitted herewith, [X]and it is hereby requested that this be a petition for an automatic extension of time under 37 CFR 1.136.

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I hereby certify that the documents referred to as attached therein and/or fee are being deposited with the United States Postal Service as "first class mail" with sufficient postage in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" on February 2, 2005. DAVIDSON, DAVIDSON & KAPPEL, LLC

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PATENT APPLICATION FEE DETERMINATION RECOI Effective October 1, 2000									09/	' 70	2710	28
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			19					RATE	FEE] [RATE	FEE
FOR			NUMBER F	ILED	NUMBER EXTRA		8	BASIC FEE	355.00	OR	BASIC FEE	710.00
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CLAIMS AS AMENDED - PART II										•	OTHER	
		(Column 1) CLAIMS		(Colui		(Column 3)	_	SMALL	ENTITY	OR 1 1	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		FIATE	ADDI- TIONAL FEE
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2-4-05 (Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	HEST MBER MOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTAL	
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